**HEALTH AND HIV**

Reducing child mortality, new HIV infections and AIDS-related deaths are priorities for Rwanda. Reducing under-five mortality and improving quality of health care for children is essential to ensure that children survive and thrive in their communities. The HIV epidemic continues to have a disproportionate impact on children, and children under five living with HIV face the highest risk of AIDS-related death. AIDS also remains a leading cause of death among adolescents, with strong gender dimensions.

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**SITUATION**

<table>
<thead>
<tr>
<th>NEWBORN HEALTH</th>
<th>STREET HEALTH</th>
<th>CHILD HEALTH</th>
<th>CHILD AND ADOLESCENT HIV</th>
</tr>
</thead>
<tbody>
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<td>Neonatal mortality remains high: 20 babies die per 1,000 live births, or 40% of under-five mortality.</td>
<td>By 2030, reduce neonatal mortality to 12 deaths per 1,000 live births.</td>
<td>Improve the quality of management of labor and sick/small newborns.</td>
<td>Health-seeking behavior for common childhood illness is low.</td>
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<td>Children with HIV lack linkage to care.</td>
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<td></td>
<td>Access to health services must be improved.</td>
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**TARGETS**

- By 2030, reduce under-five mortality to 25 deaths per 1,000 live births.
- By 2030, reduce neonatal mortality to 12 deaths per 1,000 live births.
- Improve health-seeking behavior for common childhood illnesses.

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**CHALLENGES**

- Lack of adequate human resources and equipment in health facilities.
- Lack of required skills among health workers.
- Health-seeking behavior for common childhood illness is low.
- Barriers to health-seeking need to be better understood and addressed.
- Access to health services must be improved.

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**50 children under five die per 1,000 live births.**

Common childhood illnesses like diarrhea, pneumonia and malaria are the leading causes of death among children aged 1 month to 5 years.

- Only 54% of children with acute respiratory illness receive care from a health facility or provider.
- 49% of children with fever receive care from a health facility or provider.
- 44% of children with diarrhea receive care from a health facility or provider.

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**HIV testing is low, particularly among boys (29%) compared to girls (61%).**

Only 55% of children aged 0-14 receive antiretroviral therapy for HIV, compared to 81% of adults.

HIV testing is low, particularly among boys (29%) compared to girls (61%).

Only 52% of girls – compared to 67% of boys – use condoms to prevent HIV.

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**By 2030, 95% of children and adolescents with HIV know their status.**

By 2030, 95% of children and adolescents who know their HIV status are receiving treatment.

Children with HIV lack linkage to care.

Children in care and treatment have low adherence to antiretroviral therapy.

Limited access to adolescent-friendly prevention and treatment interventions. Inadequate knowledge for behaviour change to improve demand and utilization of HIV interventions.